







# Chiropractic Services for Children

Montana Medicaid



This publication supersedes all previous Children's Chiropractic and EPSDT Chiropractic manuals. First publication by the Montana Department of Public Health and Human Services was February 2000.

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<b>NPI/API:</b>		



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# **Chiropractic Services**

## **General Overview**

Chiropractic services are rendered by providers enrolled with Montana Medicaid and are billed through Xerox State Healthcare LLC, the Department's fiscal agent. Chiropractic services payable by Montana Medicaid are limited to those provided to children age 20 and under (also referred to as EPSDT) for medically necessary services.

Medicaid does not reimburse for any chiropractic services provided to individuals age 21 and over.

This manual is to be used in conjunction with the *General Information for Providers* manual, other appropriate Montana Medicaid provider manuals, Administrative Rules of Montana, and Department fee schedules.

## **Definitions**

**Chiropractic Services**. The manipulation of the spine by a licensed chiropractor in accordance with the laws of the state in which he/she is practicing. Administrative Rule of Montana (ARM) 37.86.2211 states that chiropractic services are limited to evaluation and management office visits, manual manipulation of the spine, and x-rays to support the diagnosis of subluxation of the spine.

#### **Benefits and Limitations**

Payment for chiropractic services provided to individuals age 20 and under is limited to evaluation and management office visits, manual manipulation of the spine, and x-rays to support diagnosis of subluxation of the spine.

The Department maintains the right to review claims for medical necessity. Refer to ARM 37.85.414, Maintenance of Records and Auditing for further information.

# **Medicaid Eligibility**

Providers are required to confirm Medicaid eligibility for individuals age 20 and under. For enrolled providers, Montana Medicaid offers different methods to confirm eligibility. For methods and details on each, see the Member Eligibility and Responsibilities chapter in the *General Information for Providers* manual, available on the Provider Information website.

Provider Relations 1-800-624-3958

Integrated Voice Response (IVR) 1-800-714-0060 (24 hours)

FaxBack 1-800-714-0075

MATH Web Portal <a href="https://mtaccesstohealth.acs-shc.com/">https://mtaccesstohealth.acs-shc.com/</a>

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# **Billing Procedures**

For current billing procedures, please see the Billing Procedures chapter of the *General Information for Providers* manual on the Provider Information website.

# **Passport**

For members with a Passport designation on the Medicaid ID card, chiropractors must obtain a referral from the member's Passport provider. For more information, see the *Passport to Health* manual, available on the Provider Information website.

## Reimbursement

For chiropractic services for children age 20 and under, the Department will pay the lowest of:

- The provider's actual (submitted) charge for the service; or
- The Department's fee schedule reimbursement, as specified in the Resource-Based Relative Value Scale (RBRVS).

The Children's Chiropractic fee schedule is available on the Chiropractic page of the Provider Information website.

In the menu on the left, select the Resources by Provider Type link. Read the End User Agreement and click the I Agree option to access the list of provider pages. Scroll to the Chiropractic entry and click on it to access the resources available for that provider type. The fee schedule is in the pane titled Fee Schedules – Children's Chiropractic.

#### **Procedure Codes**

Refer to the Provider Information <u>website</u>. Click on Resources by Provider Type in the menu on the left. Read the End User Agreement and click the I Agree option to access the list of provider pages. Scroll to the Chiropractic entry and click on it to access the resources available for that provider type. See the Other Resources pane.

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